

Workshop/Conference Request & Expense Form – INSTRUCTION

This form is intended to be completed, approved and turned in to the Purchasing Department 15 days business days prior to the first Workshop/Conference date you wish to attend.

STEP ONE: WORKSHOP/CONFERENCE APPROVAL (Enter the details regarding your workshop/conference)

1. Name - Enter first and last name.
2. Department/School – What department or school do you work in.
3. Approval Date – Leave blank for supervisor to complete when signing the form.
4. Sub Needed – Do you need a substitute teacher to work during your attendance at workshop/conference.
5. Approved by – Enter supervisor’s first and last name.
6. Workshop Conference Name – Enter the complete name of the Workshop/Conference you wish to attend and attached the COMPLETED workshop/conference registration or flyer.
7. City and State – Enter the city and state where the conference is being held.
8. Arrival Date – Enter the date you will arrive for the Workshop/Conference.
9. Departure Date – Enter the date you will depart from the Workshop/Conference.
10. Registration Fee – What is the cost to register for the Workshop/Conference.
11. Was conference registration paid for with a P-card? Check, Yes or No

STEP TWO: TRAVEL EXPENSES (Enter the anticipated costs of your travel)

1. Transportation type – Select from the drop down menu the type of transportation that will be used.
 - a. If Own Vehicle will be used select “Own Vehicle” and skip to Estimated Miles (round trip) and Estimated Mileage Cost.
2. Enter estimated cost for transportation (i.e., air fare, bus/train ticket, etc.) If a Rental Car is needed at your destination, check the box and enter the estimated cost.
3. Hotel Name – Enter the complete name of the hotel. Be sure to ask for the Government or workshop/conference rate, whichever is lower.
4. Rate – Enter the nightly rate for the Hotel Room.
5. Taxes – Enter the daily tax rate for the Hotel Room.
6. # of Nights – Enter the number of nights you will be staying at the hotel.
7. Meals – Reimbursement for breakfast, lunch or dinner shall be at the federal per diem rate for the area of travel unless the meal is provided by the conference. Reimbursable meal times are as follows:
 - a. Breakfast: if you are leaving District facilities for the workshop/conference prior to 6am on the first day of travel, you may be reimbursed for breakfast.
 - b. Lunch: If you are leaving District facilities for the workshop/conference prior to 11am and not returning until after 2pm, you may be reimbursed for lunch.
 - c. Dinner: If you are leaving District facilities for the workshop/conference prior to 5pm and not returning until after 7pm, you may be reimbursed for dinner.
 - d. Incidentals: The Federal Travel Regulation Chapter 300, Part 300-3, under Per Diem Allowance, describes incidental expenses as: Fees and tips given to porters, baggage carriers, hotel staff, and staff on ships.

The allowable standard rate is listed at the top of each column. If traveling outside the Portland Metro Area, per diem rates can be found at: <http://www.gsa.gov/portal/content/104877>, then enter the State and City or area code for the area in which you are traveling to. The M&IE (Meals and Incidental Expenses) Rate should be used. It is the responsibility of the traveler to look up the Federal Per Diem Rate if traveling outside the Portland Metro Area. Otherwise the default will be the standard rate.

8. Attach the COMPLETED workshop/conference registration or flyer.
9. Submit to your supervisor or budget holder (person in charge of funds that will be paying for your travel) for signature.
10. Be sure your supervisor or budget holder has entered the budget number(s) to be charged for your travel costs.
11. Submit this form to the Purchasing Department to complete conference registration and itinerary to include hotel, flight, and/or car rental, etc., if needed.

STEP THREE: RECONCILIATION (Enter the actual costs of your travel)

1. Attended Conference? Be sure to check one box for Yes or No.
2. Additional Travel Cost – If you had to stay an extra day due to unforeseen circumstances you may have incurred additional costs that were not pre-paid. Enter the total additional Travel Costs here.
3. Other Costs – Enter expenses for additional costs that could not be pre-paid, such as taxi fare, shuttle fees, conference materials, etc. (ORIGINAL RECEIPTS REQUIRED). Please attach.
4. Actual Miles – Enter the actual miles traveled.
5. Actual Mileage Costs – Multiply “Actual Miles” times the IRS rate per mile and enter the total here.
6. Additional Hotel Costs – Enter the total additional hotel costs here.
7. Actual Meals – Enter the per diem amount for meals you actually ate.
8. Employee’s Signature – Be sure to sign the form. It will be sent back to you if not signed.
9. Employee returns a copy of the completed form to Accounts Payable.

WORKSHOP / CONFERENCE REQUEST & EXPENSE FORM - 2020/21

STEP ONE: WORKSHOP/CONFERENCE APPROVAL (Please Note: A completed Conference Registration form/flyer must be attached to this document)

Name: _____ Department/School: _____ Approval Date: _____ Sub Needed: Yes No
 Email: _____ Approved by: _____
(Supervisor's Name - Please Print) (Supervisor's Signature)
 Workshop / Conference Name: _____ K Ug' 7cbZfybW' FY[jgfuh'cb' dUJX' Zcf' VmDl WFX3 Mg No
 City: _____ State: _____ Arrival Date: _____ Departure Date: _____ Registration Fee: _____

STEP TWO: TRAVEL EXPENSES **P-Cards CANNOT be used for these expenses**

Transportation Type: (If own vehicle, leave "estimated cost" at zero & skip to "If Own Vehicle") Estimated Transportation Cost: _____
 Own Vehicle Airplane Bus Train Rental Car at destination

Purchasing will call you to schedule an appointment to book your travel when any type other than "Own Vehicle" is selected.

If Own Vehicle:
 Estimated Miles (round trip): _____ Rate per mile: _____ Estimated Mileage Cost: _____

Hotel Name: _____
 Rate: _____ Taxes: _____ Nightly Rate: _____ Estimated Hotel Cost: _____
 # of Nights: _____

Per Diem - The standard reimbursable rate for meals is \$55.00 per day which includes a maximum of \$5 per day for incidentals (i.e., taxi tip, bus fare, valet parking, etc.). The breakdown is as follows:

Meals	\$13	\$14	\$23	\$5	\$55
Date	Breakfast	Lunch	Dinner	Incidentals	Total
Total Meals					
Total Estimated Expenses					

If you need additional lines, please enter all meals on a separate worksheet. Enter "See Attached" above along with the meal total and attached the worksheet.

Total amount approved from budget # _____
 To be completed by the supervisor or budget holder

FUND	FUNC	OBJ	LOC	AREA	SUB AREA	PROJECT	AMOUNT

STEP THREE: RECONCILIATION (Please complete this step AFTER your trip.)

Attended Conference:
 YES NO

Additional Travel Cost:

(i.e., taxi fare, shuttle, baggage, conference materials, etc.) Other Costs:
ORIGINAL RECEIPTS REQUIRED

Actual Miles:

Actual Mileage Costs:

(If own vehicle, leave "estimated cost" at zero & skip to "If Own Vehicle")

Additional Hotel Costs:

 (Employee's Signature)

 (Supervisor's Signature)

Breakfast Amt.	Lunch Amt.	Dinner Amt.	Incidentals Amt.	Total (Including Incidentals)
Total Actual Meals				
Total Reimbursement to Employee				

Business Office Use Only

Rental Car PO #: _____
 Conference Reg. PO #: _____
 Flight PO #: _____
 Hotel PO #: _____